

## Behavioral and Primary Healthcare Coordination (BPHC) Member Frequently Asked Questions

NOTE: The State is currently seeking federal approval for the BPHC program through a State Plan Amendment (SPA). Therefore, information in this document is subject to change pending the outcome of the approval process.

### 1. What is the Behavioral and Primary Healthcare Coordination (BPHC) program?

The BPHC program will provide eligible individuals with help managing their physical and behavioral health. Community mental health centers will provide services such as help scheduling appointments with doctors, coaching on communicating more effectively with doctors and following instructions on medications or other doctor recommendations.

### 2. Do I qualify for BPHC?

You may qualify for the BPHC program if you have a mental health condition such as schizophrenia, depression or bipolar disorder and you need help managing your healthcare. You must be age 19 or older. The money that you make in a month cannot be higher than 300 percent of the federal poverty level (for example: \$2,918 per month). There are certain income disregards that may be applied that may lower the amount of your income that counts. For example, if there are children or other qualifying dependents living in your household, a \$361 deduction per qualifying individual may be applied.

The BPHC program is intended primarily to provide Medicaid eligibility for individuals with significant mental health needs over 100 percent of the federal poverty level (\$973 per month for a single individual or \$1,311 for a married couple) who would not otherwise be Medicaid eligible. Individuals who are disabled and below the federal poverty level may be eligible for full Medicaid benefits. While no one is prohibited from applying to the BPHC program, individuals who are already Medicaid eligible will have continued access to services similar in nature to BPHC.

If you are on spend down, meaning you have to spend a certain amount of money on your healthcare every month before Medicaid will pay, and you meet all the other program requirements, BPHC may be an option for you.

### 3. I received a letter saying I will no longer qualify for spend down and may be eligible for BPHC. When should I apply for BPHC?

**Please contact your local community mental health center (CMHC) as soon as possible** for assistance in assessing options and applying for this program. You must apply for BPHC right away. If you do not apply by April 1, 2014, you may have a gap in your Medicaid coverage.

### 4. Where do I apply for BPHC?

You can apply for BPHC at the community mental health center (CMHC) where you go for your behavioral healthcare services or any DMHA approved BPHC CMHC provider. A list of CMHCs near you can also be found at

<http://www.indianamedicaid.com/ihcp/ProviderServices/ProviderSearch.aspx>. On this web page, under “Provider” select “Other” and “Mental Health Provider.” Then select “Community Mental Health Center (CMHC)” under “Specialty.” You can also enter the city you live in to find the provider nearest to you.

**5. How do I apply for BPHC?**

The community mental health center (CMHC) will meet with you to complete the BPHC application. They will ask you questions about your physical and behavioral health and enter the information you provide. You will then receive a letter telling you if you qualify for the program. This letter will give you instructions on what your rights are if you do not qualify.

**6. I receive Medicaid Rehabilitation Option (MRO) services today. Will I still be eligible for MRO if I am on BPHC?**

Yes, you can receive both MRO and BPHC if you meet the requirements for both programs.

**7. What services will I receive if I am eligible for BPHC?**

You will be eligible to receive all medically necessary Medicaid services you qualify for if you are eligible for BPHC. Medicaid provides health care coverage and assistance for medical expenses such as doctor visits, prescription drugs, dental and vision care, family planning, mental health care, surgeries and hospitalizations. You will also receive the BPHC service. BPHC will provide care such as help in scheduling appointments with doctors, coaching on communicating more effectively with doctors and following instructions on medications or other doctor recommendations.

**8. How do I keep my BPHC benefits?**

To keep your BPHC benefits, at least every six months you need to provide updated information to your community mental health center (CMHC) to see if you are still eligible for the program. Your CMHC will remind you when it is time to renew. It is important you renew on time or you may lose your Medicaid coverage.

You will also need to renew your Medicaid eligibility on a regular basis, usually one time per year. You will receive a letter in the mail when it is time for you to renew. It is important you renew on time or you may lose your coverage

**9. Who do I call if I have questions about BPHC?**

You may contact your local CMHC provider or contact the Indiana Division of Mental Health and Addiction at 317-232-7800 if you have questions or need additional information related to BPHC. For inquiries related to Medicaid eligibility, please contact 1-800-403-0864.